

## **PUBLIC WORKS – Elevator Safety Division**

1700 Convention Center Drive, 1st FL Miami Beach, Florida 33139 Main Line: 305-673-7225

www.miamibeachfl.gov

## SUPERVISOR AFFIDAVIT FOR NEW CONSTRUCTION OR ALTERATION

I,	(supervisor'	s name),	do he	reby attest	that
	· ·				
EVC/EVR#:D/MB#:					
compliance with the applicable provisions of Florida Statutes,					
(ASME) Standard A17.1 and the Florida Administrative Code,	•		, ,		9
, ,					
I represent			_(elevator d	company nai	me), as
the supervisor of installation.					
	(661 11				
Elevator Certificate of Competency No: Name of	of CC holder:				·
Supervisor's Signature (x)		Date:			
THIS ORIGINAL SIGNED DOCUMENT MUST BE RETURNED TO THE ELEVATOR INSPECTOR ON THE DAY OF FINAL INSPECTION IN ORDER TO ISSUE A CERTIFICATE OF OPERATION FOR THE ELEVATOR DESCRIBED HEREIN IF NEW CONSTRUCTION OR ALTERATION. THIS DOCUMENT WILL THEN BE RETURNED TO THE PUBLIC WORKS – ELEVATOR SAFETY DIVISION BY THE ELEVATOR INSPECTOR.					
THIS DOCUMENT WILL THEN BE RETURNED TO THE PUBLIC WORKS	- ELEVATOR SAFE	H DIVISION	BT IHE ELEV	VAIOR INSPEC	TOR.
STATE OF FLORIDA					
COUNTY OF					
The foregoing instrument was acknowledged before me this	day of _		, 20_	, b	у
(nan	ne of person acki	nowledaina)			
	ne er percen dem	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Personally Known or Produced Identificatio	ın				
,		<del></del>			
Type of Identification Produced					
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Signature of Notary Public, State of Florida					
Printed Name of Notary Public, State of Florida	Publi	c Notary Se	al		
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